

not
RCRA

5ED301 - further Research Required

Med - YW
5/11/88

SITE DESCRIPTION/EXECUTIVE SUMMARY

Site Name and Location

Dial Trucking
14015 Haggerty Road
Plymouth, Michigan 48170

County: Wayne
Michigan Code Number: 82-T1S-R8E-24CC
DNR District: Detroit
EPA ID Number: MID003782935

SAS Score/Screen No.: 04

The Dial Trucking site is a 26 acre, type II landfill and a solid waste transfer facility located in Plymouth Township. The area is fenced on 3 sides with the west border being the Sly Creek. Since the site opened as a licensed landfill and transfer facility in the 1960's it has accepted mixed municipal and industrial waste (non-ferrous metals) until its closure in 1971 under Act 87.

In June of 1984, Bob Ratz of the Wayne County Health Department visually inspected the site. He found what appeared to be leachate draining into Sly Creek, which flows into the Middle River Rouge. Plymouth Township utilizes a municipal water supply and no wells exist on site. The WCHD is considering sampling, but to date none have been initiated.

Recommendations for EPA

This site receives a low priority for inspection.

US EPA RECORDS CENTER REGION 5



RECEIVED
DEC 22 1987

Program
Support Section

Pre-HRS Score: To be determined
Projected HRS Score: To be determined
SI Priority: low/EPA lead
Hours Spent: 10 + 80 + _____ + _____ + _____ = 90
Initial & Date: SC 255 17 Aug 12-15-87

Date of Previous Summary:
Previous Author:

Current Date: 12/7/87
Author: J. Gatica

Site Assessment Unit
Environmental Response Division
Michigan Dept. of Natural Resources

00948 TW



POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 1 - SITE INFORMATION AND ASSESSMENT

I. IDENTIFICATION

01 STATE 02 SITE NUMBER
26 MID 005 782935

II. SITE NAME AND LOCATION

01 SITE NAME (Legal, common, or descriptive name of site)	02 STREET, ROUTE NO., OR SPECIFIC LOCATION IDENTIFIER			
DIAL TRUCKING	14015 HAGGERTY ROAD			
03 CITY	04 STATE	05 ZIP CODE	06 COUNTY	07 COUNTY CODE
Plymouth	MI	48170	WAYNE	163
09 COORDINATES	08 CONG DIST			
LATITUDE 42° 23' 06" -	15			
LONGITUDE 083° 26' 55" -	NORTHVILLE QUAD - 7.5' SERIES			
10 DIRECTIONS TO SITE (Starting from nearest public road)				
FROM EAST 96 exit and turn right onto 10 mile ROAD. Follow 10 mile for roughly a mile then turn left onto HAGGERTY ROAD. Follow HAGGERTY south for approximately 6 miles. The site is on the southwest corner of the intersection of SHUMILCHIST ROAD & HAGGERTY ROAD.				

III. RESPONSIBLE PARTIES

01 OWNER (if known)	02 STREET (Business, mailing, residential)			
DANA BURNS	14015 HAGGERTY ROAD			
03 CITY	04 STATE	05 ZIP CODE	06 TELEPHONE NUMBER	
Plymouth	MI	48170	()	
07 OPERATOR (if known and different from owner)	08 STREET (Business, mailing, residential)			
METCOR METAL (?)				
09 CITY	10 STATE	11 ZIP CODE	12 TELEPHONE NUMBER	
			()	

13 TYPE OF OWNERSHIP (Check one)

☒ A. PRIVATE ☐ B. FEDERAL: _____ (Agency name) ☐ C. STATE ☐ D. COUNTY ☐ E. MUNICIPAL
☐ F. OTHER: _____ (Specify) ☐ G. UNKNOWN

14 OWNER/OPERATOR NOTIFICATION ON FILE (Check all that apply)

☐ A. RCRA 3001 DATE RECEIVED: _____ MONTH DAY YEAR ☐ B. UNCONTROLLED WASTE SITE (CERCLA 103 G) DATE RECEIVED: _____ MONTH DAY YEAR ☒ C. NONE

IV. CHARACTERIZATION OF POTENTIAL HAZARD

01 ON SITE INSPECTION	BY (Check all that apply)			
<input checked="" type="checkbox"/> YES DATE 6-1-84 MONTH DAY YEAR	<input type="checkbox"/> A. EPA <input type="checkbox"/> B. EPA CONTRACTOR <input type="checkbox"/> C. STATE <input type="checkbox"/> D. OTHER CONTRACTOR			
<input type="checkbox"/> NO	<input checked="" type="checkbox"/> E. LOCAL HEALTH OFFICIAL <input type="checkbox"/> F. OTHER: _____ (Specify)			
CONTRACTOR NAME(S): _____				
02 SITE STATUS (Check one)	03 YEARS OF OPERATION			
<input checked="" type="checkbox"/> A. ACTIVE <input checked="" type="checkbox"/> B. INACTIVE <input type="checkbox"/> C. UNKNOWN	19605 1971 BEGINNING YEAR ENDING YEAR <input type="checkbox"/> UNKNOWN			

04 DESCRIPTION OF SUBSTANCES POSSIBLY PRESENT, KNOWN, OR ALLEGED

Municipal ; INDUSTRIAL WASTE

05 DESCRIPTION OF POTENTIAL HAZARD TO ENVIRONMENT AND/OR POPULATION

ENVIRONMENT - Surface water, groundwater ; Soil contamination

V. PRIORITY ASSESSMENT

01 PRIORITY FOR INSPECTION (Check one, if high or medium is checked, complete Part 2 - Waste Information and Part 3 - Description of Hazardous Conditions and Incidents)			
<input type="checkbox"/> A. HIGH (Inspection required promptly)	<input type="checkbox"/> B. MEDIUM (Inspection required)	<input type="checkbox"/> C. LOW (Inspect on time available basis)	<input type="checkbox"/> D. NONE (No further action needed, complete current disposition form)

VI. INFORMATION AVAILABLE FROM

01 CONTACT	02 OF (Agency/Organization)	03 TELEPHONE NUMBER
BOB RATZ	WAYNE Co. Health Dept.	(313) 326-4900
04 PERSON RESPONSIBLE FOR ASSESSMENT	05 AGENCY	06 ORGANIZATION
JEFF GATICA / STEVE CUNNINGHAM	MDH&E	ERD
	07 TELEPHONE NUMBER	08 DATE
	(517) 373-4800	12/7/87 MONTH DAY YEAR



... I. HIGHLY VOLATILE
 ... J. EXPLOSIVE
 ... K. REACTIVE
 ... L. INCOMPATIBLE
 ... M. NOT APPLICABLE
☒ *unknown*

EPA FORM 2070-12 (7-81)



POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT

PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE 02 SITE NUMBER
26 MID003782935

II. HAZARDOUS CONDITIONS AND INCIDENTS

01 ☒ A. GROUNDWATER CONTAMINATION 02 ☐ OBSERVED (DATE: _____) ☒ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: 77,776 04 NARRATIVE DESCRIPTION

A potential exist for groundwater contamination due to the alleged leachate contamination.

01 ☒ B. SURFACE WATER CONTAMINATION 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☒ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: 77,776 04 NARRATIVE DESCRIPTION

IT is believed that surface water is contaminated due to the alleged visual citing in June 8, 1984

01 ☐ C. CONTAMINATION OF AIR 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

N/A

01 ☐ D. FIRE/EXPLOSIVE CONDITIONS 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

UNKNOWN

01 ☐ E. DIRECT CONTACT 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

N/A

01 ☒ F. CONTAMINATION OF SOIL 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☒ ALLEGED
03 AREA POTENTIALLY AFFECTED: 26 (Acres) 04 NARRATIVE DESCRIPTION

IT is believed that soil has been contaminated due to the alleged leachate contamination.

01 ☐ G. DRINKING WATER CONTAMINATION 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

N/A

01 ☐ H. WORKER EXPOSURE/INJURY 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 WORKERS POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

N/A

01 ☒ I. POPULATION EXPOSURE/INJURY 02 ☐ OBSERVED (DATE: _____) ☒ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

A potential exist for population injury due to the alleged surface water contamination.



POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE 02 SITE NUMBER

26 MDO 3752935

II. HAZARDOUS CONDITIONS AND INCIDENTS (Continued)

01 ☒ J. DAMAGE TO FLORA
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☒ POTENTIAL ☐ ALLEGED

A potential exist for flora damage with the alleged leachate contamination.

01 ☒ K. DAMAGE TO FAUNA
04 NARRATIVE DESCRIPTION (include name(s) of species)

02 ☐ OBSERVED (DATE: _____)

☒ POTENTIAL ☐ ALLEGED

A potential exist for faunal damage with the alleged drain contamination by leachate.

01 ☐ L. CONTAMINATION OF FOOD CHAIN
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL ☐ ALLEGED

UNKNOWN

01 ☒ M. UNSTABLE CONTAINMENT OF WASTES
(Spills/runoff/standing liquids/leaking drums)

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL ☒ ALLEGED

03 POPULATION POTENTIALLY AFFECTED: 77,776 04 NARRATIVE DESCRIPTION

On a visual inspection (by the LCHD) of the site in June 8 1984 it was believed that leachate was draining into the Sly drain.

01 ☐ N. DAMAGE TO OFFSITE PROPERTY
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL ☐ ALLEGED

N/A

01 ☐ O. CONTAMINATION OF SEWERS, STORM DRAINS, WWTPs
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL ☐ ALLEGED

N/A

01 ☐ P. ILLEGAL/UNAUTHORIZED DUMPING
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL ☐ ALLEGED

N/A

05 DESCRIPTION OF ANY OTHER KNOWN, POTENTIAL, OR ALLEGED HAZARDS

N/A

III. TOTAL POPULATION POTENTIALLY AFFECTED: 77,776

IV. COMMENTS

V. SOURCES OF INFORMATION (Cite specific references, e. g., state files, sample analysis, reports)

WAYNE CO Health DEPT.
MDNR - LANSING - ERD FILE